



FY 2019 Room, Board and Watchful Oversight Amendment

Minimum Standards for Child Placing Agencies and Child Caring Institutions

Office of Residential and Community Based Services

7/1/2018

Georgia Department of Juvenile Justice (DJJ) asks that our Room Board and Watchful Oversight (RBWO) providers comply with the following amendments in addition to and in accordance with the existing RBWO Minimum Standards for Child Placing Agencies and Child Caring Institutions. This document parallels the format of the RBWO Minimum Standards but only features the Standards that have been amended or customized to correspond with Georgia DJJ policies, procedures, and protocols.

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Introduction

DJJ's mission is to protect and serve the citizens of Georgia by holding young offenders accountable for their actions through the delivery of services and sanctions in appropriate settings and by supporting youth in their communities to become productive and law-abiding citizens. Within this mission, DJJ's partnerships and collaboration with RBWO providers are vital. This amendment to the existing RBWO Minimum Standards serves to assist in providing DJJ contracted RBWO providers with more specific direction and clarity in working with DJJ youth.

Within the existing RBWO Minimum Standards, the references to "DFCS/the Division" are interchangeable with "DJJ/the Department" unless otherwise modified within this amendment; however, it is important to note that commitment to DJJ is not equivalent to custody to DFCS. Although DJJ maintains custody of committed youth, the youths' parents/guardians still maintain their parental rights. Please keep this in mind when observing and conforming to the Standards.

This amendment is structured in a way that parallels the current RBWO Minimum Standards; the relevant Standard will be listed followed beneath by DJJ's amended portion in *italics*. The amended portion will either begin with "*additionally*" or "*alternatively*." When it begins with "*additionally*," it is indicating that the requirement for DJJ is in **addition** to the already existing Standard in the RBWO Minimum Standards. When it begins with "*alternatively*," it is indicating that the requirement for DJJ **alternates** from the existing Standard.

Please note that DJJ does not currently utilize or access GA SHINES or GA+SCORE. All of the existing Standards that reference these systems still apply; however, any specific requirement to document or upload information into these systems is not relevant to DJJ.

Lastly, please ensure compliance with Standard 13.38 which requires providers to have a secure agency email domain (Example: Rachel@rachelsplace.com). This will help eliminate electronic communication barriers related to email attainment and identification.

Thank you for all of your support and care in working with DJJ youth!

Safety

Standard 1: Safety of Children in Care

- 1.3 Providers must ensure that employees in positions or classes of positions that have direct care, treatment, custodial care, access to confidential information of clients or any combination thereof (to include administrative support staff, janitorial/housekeeping staff, maintenance/grounds keeping staff and security guards) shall undergo a criminal history investigation prior to being hired and every five years thereafter (based upon hire date anniversary). This requirement became effective July 1, 2014. Staff hired prior to July 1, 2009 but before July 1, 2014 must have their 5-year criminal records check completed by their anniversary date as they reach their fifth (5th) year of service. The criminal history investigation shall include fingerprint record check pursuant to the provisions of Section 49-2-14 Of the Official Code of Georgia, Annotated (O.C.G.A). Providers shall maintain and upon request, provide DHS with evidence of a satisfactory criminal record check of any members of its staff or a subcontractor's staff assigned to or proposed to be assigned to any aspect of the performance of this contract. Providers must utilize the Georgia Applicant Processing Services (GAPS) at www.ga.cogentid.com to comply with this requirement.
- a. Only RBWO Staff (Director, Case Support Supervisor, Case Support Worker, Human Service Professional, Life Coach and Child Care Worker) criminal records checks are required to be uploaded into GA+ SCORE. These checks must be uploaded by the date of hire and annually within 30 days before the staff's anniversary. (Note: The OIG check is renewed every five years at the staff's anniversary).

Additionally, prior to performance of contract duties, the provider and any subcontractor having contact with the youth placed by the Department shall undergo and clear a criminal record history investigation conducted by the Department Criminal History Unit {CHU} and a fingerprint record check as outlined in in DJJ Policy 3.52 Background Investigations and DJJ Policy 23.1 Prison Rape Elimination Act. To initiate this requirement, the Department's CHU will provide training to the provider on utilizing DJJ's Background Check Application System and provide instructions on how to obtain and submit fingerprint data for review. All fingerprints must be completed within five business days of receipt of the cleared DJJ background clearance. Criminal history investigation and fingerprinting shall be conducted prior to the performance of any contractual duties, unless otherwise notified.

- a. *Communications between the Criminal History Unit and the hiring authority regarding background investigations and documents may be done via email; the Criminal History Unit email address is: CHUManager@djj.state.ga.us*
- b. *Providers shall maintain and upon request, provide DJJ with evidence of a satisfactory criminal record check of any members of its staff or a subcontractor's staff assigned to or proposed to be assigned to any aspect of the performance of contract duties; all staff personnel files shall include the following pertaining to their criminal record check: the DJJ Background Clearance and the DJJ Determination Letter.*

- 1.6 Providers must have two face-to-face contacts a month with each child placed. One of those contacts must be an Every Child Every Month (ECEM) contact. The other contact is called a general contact. A General Contact is a purposeful visit; however it does not have to occur in the home. The General Contact must be conducted by the CCI Human Services Professional (HSP), Life Coach (LC) or the CPA Case Support Worker (CSW) or Case Support Supervisor (CSS) and generally focuses on safety and well-being. The General Contact will be documented in the standard narrative type in Georgia SHINES or the Safety, Permanency, and Well-being narrative type. All documentation must be entered into GA SHINES within 72 hours of the contact. Some of these contacts should be unannounced visits. (For details on ECEM contacts, review RBWO Minimum Standard ECEM 6.20)

Alternatively, providers will support the DJJ Community Case Manager (CCM) with maintaining contact with the youth throughout their time in RBWO placement. The youth will receive at least one face-to-face contact from the DJJ CCM every 90 days; however, youth receiving Title IV-E services will receive a face-to-face contact from DJJ at least once every 30 days. The DJJ CCM will also have a minimum of one telephone/correspondence contact with the youth monthly as outlined in DJJ Policy 20.32 Standards of Contact.

- 1.10 Providers must identify an agency staff person or subcontracted agency representative to receive reports from children in R.B.W.O. placements about any concerns, grievances or complaints. The *child ombudsmen* must not have any direct care or oversight responsibility for the child (such as client advocates, clergymen, therapists, etc.). All children in the program shall receive clear communication regarding the identification of the ombudsmen and the method to be used to contact this individual. The contact process should reflect the age and developmental abilities of the children being served.

Additionally, providers shall ensure all DJJ youth as well as their parent(s)/guardian(s) receive clear communication regarding the contact process for DJJ's Office of Ombudsman as outlined in DJJ Policy 15.9 Ombudsman Guidelines. Methods for filing a complaint or inquiry/referral are indicated below. DJJ Office of Ombudsman flyers are available through the DJJ Regional Treatment Services Specialist (RTSS) and should be posted around the placement where the information is easily accessible and readily available to the youth. (Please visit <https://djj.georgia.gov/office-ombudsman> for additional information)

- a. Email – djombudsman@djj.state.ga.us
- b. Mail – complaints may be mailed to: Department of Juvenile Justice, Office of Ombudsman, 3408 Covington Highway, Decatur, Georgia 30032
- c. Phone – call toll-free 1-855-396-2978
- d. Online – complaint referral form is located at:
<http://www.djj.state.ga.us/Employees/DJJDrupa/OmbudsmanForm.aspx>
- e. Calls or visits may be made to the local facility or Community Services Office

- 1.11 Providers must notify OPM whenever there is a Significant Event relating to the provider's operation or to the care or protection of children in its care and/or supervision. Notification must be made as soon as possible but within one calendar day via GA+SCORE. Additionally, based on circumstances and the severity of situations, providers should use good judgment in determining which Significant Events should also be reported verbally to OPM.

Additionally, providers must notify the Department whenever there is a Significant Event; Significant Events for DJJ youth are also inclusive of runaways, new legal charges, Prison Rape Elimination Act (PREA) incidents, abuse, neglect, exploitation, and any incidents which have the potential for incurring legal liability or adverse publicity. Notification must be made immediately but no later than one hour via the Residential Emergency Phone List; if the provider does not receive a "live person" from their initial contact they will leave a detailed message and move to the next person on the contact list until they speak to a DJJ representative as outlined in DJJ Policy 20.24 Community Residential Programs. Providers will also follow their Incident Reporting procedure and all incident reports shall be forwarded to the appropriate DJJ CCM, D/RTSS, and DJJ Residential Placement Specialist (RPS)/Case Expeditor within 24 hours of the incident. {Please see Appendix J for the Residential Emergency Phone List}

- a. Providers, to include any subcontractors, will comply with the Prison Rape Elimination Act (PREA) of 2003 (Federal Law 42 U.S.C.15601 et seq.), and with all applicable PREA Standards, Department Policies related to PREA and Department Standards related to PREA for preventing, detecting, monitoring, investigating, and eradicating any form of sexual abuse within Department Facilities/Programs/Offices owned, operated or contracted. In addition to "self-monitoring requirements" the Department will conduct announced or unannounced, compliance monitoring to include "on-site" monitoring. Failure to comply with PREA, including PREA Standards and Department Policies may result in contract termination.
 - i. Provider must ensure that all PREA incidents or alleged incidents are reported to DJJ Office of Investigations.
 - ii. Provider will have all personnel sign a PREA Staff Acknowledgement Statement and keep the signed form in the employee's file. Each Staff member must sign their PREA Acknowledgement form within five (5) business days of hire; for existing staff, training and signature must be obtained within 72 hours of contract execution. {Please see Appendix J for the Staff PREA Acknowledgement Form}
 - iii. Provider will have all youth, upon admission and in their care, sign a PREA Youth Acknowledgement Statement and keep the signed form in the youth's file. Each admitted youth must sign their PREA Acknowledgement form within 48 hours of placement or contract execution. {Please see Appendix J for the Youth PREA Acknowledgement Form}
 - iv. Provider must cooperate fully with the DJJ Agency PREA Coordinator without fear of reprisal or reprimand. The DJJ Agency PREA Coordinator will have complete and unrestricted access to all residential programs.
 - v. Provider will provide the DJJ PREA Coordinator with an update of any changes in PREA Compliance Managers within two weeks of the change. The position of the

- PREA Compliance Manager must be included in the organizational structure of the program. Only staff who serve in the position of mid-management or above in residential programs will be eligible to serve as the PREA Compliance Manager.*
- vi. During the interview process providers will ask all applicants and prospective employees about previous sexual abuse misconduct.*
 - vii. All allegations of sexual abuse and sexual harassment in community residential programs will be administratively and/or criminally investigated by DJJ Office of Investigations. If the staff resigns or is terminated or if the victim/reporter recants the allegation, the investigation will still be completed by the DJJ Office of Investigations.*
 - viii. All suspected crime scenes shall be secured as outlined in DJJ Policy 8.42 Crime Scene Preservation to prevent unauthorized access by any person, removal of evidence, or contamination of the crime scene in any manner.*
 - ix. Providers are responsible for providing an accurate count of DJJ residents to the DJJ RTSS. Providers who have 51% or more of DJJ residents for seven months or more will be subject to Department of Justice (DOJ) audits. Providers are responsible for contracting with OO1 Certified Auditors to conduct an independent audit with assistance from the Agency-wide PREA Coordinator every three years.*
 - x. Youth in community residential programs may report sexual abuse or seek relief against retaliation by:*
 - Contacting the local sexual assault center;*
 - Calling the Department of Family and Children Services Hotline, 1-855-422-4453;*
 - Telling a counselor, teacher, community case manager, medical or mental health staff, Director, Parent/Guardian, Chaplain or Minister, or any trusted adult;*
 - Calling the DJJ Office of Victim Services, toll free at 1-866-922-6360; or*
 - Writing the DJJ Ombudsman Office at the Central Office or calling toll free at 1-855-396-2978*
 - xi. Providers must prominently post the Department of Family and Children Services (DFCS) and Rape Crisis Center hotline numbers. All 800 abuse numbers must be accessible to youth.*
 - xii. Provider staff who engage in sexual abuse will be prohibited from contact with youth and will be reported to law enforcement agencies and relevant licensing bodies, unless the activity was clearly not criminal.*
 - xiii. Accommodations will be made in accordance with DJJ Policy 15.10 Language Assistance Services to ensure that youth who are limited English proficient (LEP), deaf, or disabled are able to report sexual abuse to staff directly, through interpretive technology, or through non-youth interpreters.*
 - xiv. Residential Providers are required to complete PREA training. The PREA training may be completed through the parent company as long as the training meets all the requirements listed in Juvenile Facility Standards United States Department of Justice Final Rule 28 C.F.R. Part 115 Docket No. OAG-131 RIN 1105-AB34/*

standard 115.331 Employee Training {Provision A(1 thru 11} and all training is documented. Residential Providers may complete required PREA training through GA DJJ online training. If utilizing the GA DJJ online training, the guidelines are as follows:

- i. Each staff member must complete the online PREA Training series within thirty (30) days of hire; for existing staff, each staff member must complete the training within thirty (30) days of contract execution.*
- ii. DJJ will provide an online PREA refresher training every two years; all staff members are required to complete the online refresher training as designated by DJJ's PREA Coordinator.*

- 1.12 Providers must notify OPM Manager or Supervisor immediately when there has been a significant injury or death of any child placed in any facility, group home, or foster home operated by the provider, whether or not the injured or deceased child is in the custody of the Division. Notification must be reported verbally to OPM followed by input into the GA+SCORE system.

Additionally, providers must also notify the DJJ RTSS immediately when there has been a significant injury or death of any child placed in any facility, group home, or foster home operated by the provider, whether or not the injured or deceased child is in the care of the Department.

- 1.13 Providers must have and follow their protocol for children who are considered runaways or otherwise absent without permission.

Additionally, providers must notify the Department immediately but no later than one hour via the Residential Emergency Phone List and follow their Incident Reporting procedure for youth who are considered runaways or otherwise absent without permission. (See Standard 1.11}

Standard 2: Safe and Appropriate Behavior Management

- 2.4 If corporal punishment is used with any child in the Division's custody, the incident must be reported to county CPS and the provider must take appropriate actions to prevent a recurrence. Providers must cooperate fully with the Division in assessing alleged incidents of the use of corporal punishment.

Additionally, providers must notify the Department immediately but no later than one hour via the Residential Emergency Phone List and follow their Incident Reporting procedure if corporal punishment is used with any youth in the Department's care. Provider agrees to cooperate fully with the Department in its investigation of all incidents, and implement all corrective actions necessary to ensure the safety and well-being of youth in DJJ care.

- 2.6 As a result of a corporal punishment incident, if children in the Division's custody remain in the foster home, the provider must develop a corrective action plan with the foster parent, which

must be signed by all parties involved and monitored to make sure the foster parents are in compliance. Children must be removed and the home closed to DFCS placements if any of the following apply:

- a. The foster parents are not amenable to change or correct their disciplinary practices, or to Division intervention;
- b. The incident of corporal punishment had a direct impact on the safety and well-being of a child, or posed a serious risk to the safety of a child; or
- c. A second incident of corporal punishment occurs in the foster home placement.

Alternatively, there is no exception to this Standard for DJJ youth; all DJJ youth must be removed and the home closed to DJJ placements as a result of a corporal punishment incident.

- 2.7 If the provider is a CCI and an instance of corporal punishment occurs, an organizational corrective action plan must be submitted (even if the staff person in question is terminated) and approved by OPM. In addition, a corrective action plan for an individual staff member is acceptable when:

- a. it is the first incident involving the staff member;
- b. the staff person is amenable to change and it is clearly documented that the individual has demonstrated a willingness to use appropriate disciplinary practices going forward; and
- c. the incident of corporal punishment has not posed a serious risk that directly impacts the child's safety and well-being.

Additionally, if the provider is a CCI and an instance of corporal punishment occurs, the organizational corrective action plan must be submitted to the DJJ RTSS (even if the staff person in question is terminated) and approved by the DJJ Office of Residential and Community Based Services.

Quality of Care

Standard 3: Comprehensive and Family-Centered Services

- 3.0 Every child must have an Individualized Skills Plan (ISP) that is strength-based and reflective of assessment findings. It must promote the welfare, permanency, education, interests and health needs of the child and address emotional and psychological needs. Assessments, service plans, and service delivery must reflect and be tailored to the needs, strengths and resources of the child and family. The issue of permanency must be addressed in every service plan. All ISP's must be in accordance with recognized professional child welfare standards; shall provide for the participation of the family in the plan; and shall be appropriate given the child's needs.

Additionally, every youth in the care of the Department shall have a DJJ Service Plan as outlined in DJJ Policy 20.31 Needs Assessment and Service Planning. Any plan developed by the residential program will be a supplement to the DJJ Service Plan and will not substitute for a DJJ

Service Plan. Providers will integrate the DJJ Service Plan into any supplemental plans created for the youth.

- 3.1 The provider must carefully and immediately assess the needs of all children placed and develop a 7-Day ISP within seven days of admission. The 7-Day ISP is an extension of the admissions assessment whereby immediate safety, health and placement adjustment needs are considered and a plan developed to address immediate needs. The 7-Day ISP sets goals and objectives through the first 30 days of placement.

The 7-Day should address at a minimum immediate placement issues such as:

- Increased Placement Supervision or Contacts by Case Support Worker or HSP
- Precautions or Other Safety Measures
- Immediate needs related to:
 - o Health (including medication management)
 - o Behavioral Management
 - o Educational/Vocational
 - o Personal/Social
 - o Family Visitation/Contact
 - o Placement Adjustment
 - o Scheduled Court, FTMs or other Case Related Appointments

The 7-Day ISP must be submitted to the child's County DFCS Case Manager within 5 business days of completion. Providers must maintain documentation verification of submission to the Case Manager.

Additionally, the DJJ CCM, youth, Human Services Professional (HSP), and to the extent possible, the parent/legal guardian will discuss, review, and update the DJJ Service Plan within 7 days of placement to guide the delivery of services as outlined in DJJ Policy 20.31 Needs Assessment and Service Planning.

The 7-Day Individualized Skills Plan (ISP) must be submitted to the youth's DJJ CCM within five (5) business days of completion.

- 3.2 The first comprehensive ISP is due by the 30th day of the placement. Providers will update ISPs at least every six months or whenever needs assessments warrant a change in the service plan. Providers must set a timeframe for regular, periodic review of the ISP. The review should involve the child, family, DFCS and other stakeholders as appropriate. Provider must submit to the DFCS Case Manager within 5 business days.

Additionally, the DJJ Service Plan will be reviewed and revised by the DJJ CCM at least every 90 days or upon significant change as outlined in DJJ Policy 20.31 Needs Assessment and Service Planning.

The ISP reviews should involve the youth, parent(s)/guardian(s), DJJ CCM and other stakeholders as appropriate; provider must submit the ISP to the DJJ CCM within five (5) business days.

- 3.6 A copy of the ISP is provided to the child (when developmentally and age appropriate), any caregiver of the child and DFCS.

Alternatively, a copy of the ISP is provided to the youth, parent(s)/guardian(s), and the DJJ CCM.

- 3.7 The provider must maintain records to document the provision of services:
- a. Providers must permit authorized representatives of the Division access to all records and information at any time.
 - b. The case record must contain a monthly summary of the services provided to the child and the progress being made by the child in achieving the goals as outlined in the ISP.

Additionally, the case record must contain the DJJ RBWO Monthly Progress Reports detailing the services provided to the youth and the progress being made by the youth in achieving the goals as outlined in the DJJ Service Plan and ISP. (Please see Appendix J for the DJJ RBWO Monthly Progress Report)

- 3.10 Children and young people are supported and encouraged to maintain and strengthen connections with their birth families, especially their parents and siblings. Children are provided with practical support to maintain contact with parents, family and other significant people unless expressly prohibited by DFCS.

Alternatively, youth are provided with practical support to maintain contact with parent(s)/guardian(s), family, and other significant people as listed and approved on their DJJ approved visitation list.

- 3.11 If the child placed has siblings in care with whom they are not placed, the ISP must include a sibling visitation plan unless in accordance with the DFCS case manager, a provider sibling visitation plan is not required. If a sibling visitation is not required, the reason(s) why must be documented in the case record. Sibling visitation plans should be coordinated and agreed upon with the DFCS case manager.

Alternatively, youth in DJJ care do not require a sibling visitation plan. If a sibling visitation plan is needed, it should be coordinated and agreed upon with the DJJ CCM.

Standard 4: Appropriateness of Admissions

- 4.1 Providers must only accept referrals for children with program designations for which they have been approved unless a waiver has been granted by OPM.

Alternatively, providers must only accept referrals for children with program designations for which they have been approved. The DJJ Office of Residential and Community Based Services does not grant program designation waivers.

- 4.3 Providers will give DFCS notice of its decision to accept or reject referrals upon receipt of completed admissions packet as soon as possible, but no longer than two calendar days. Placement of children accepted for admission should occur as soon as possible or within a timeframe negotiated with the DFCS case manager.

Alternatively, provider will give written notice to the Department on their agency's letterhead regarding acceptance or denial within three (3) business days of receiving the RBWO referral packet. If the decision requires an interview as part of the admission process, then the interview and the acceptance or denial must be conducted within seven (7) business days. Placement of youth accepted for admission will occur as soon as possible or within a timeframe negotiated with the DJJ CCM as outlined in DJJ Policy 20.22 Placement of Youth.

- 4.4 For children referred by Fulton or DeKalb County, these admission decisions must be made via written notice within 8 hours of the referral. For children admitted, they must be placed within 23 hours of the approved admission.

Alternatively, there is no variation in the admission process for Fulton or DeKalb County youth for DJJ.

- 4.5 Providers must admit all children accepted for emergency admission within 23 hours of the time the provider receives the referral information.

Alternatively, emergency admission timeframes will be discussed and agreed upon with the placing DJJ Case Expeditor as needed.

- 4.8 Providers must comply with the following placement conditions and requirements regarding each of the identified care settings:

Foster Homes

- a. No child will be placed in a foster home if that placement will result in more than three (3) foster children in that home or, a total of six (6) children in the home, including the foster family's biological and/or adopted children, without the written approval of the Placement & Permanency Services Director or designee. Note: Capacity waivers are not required for sibling groups over 3 if they are the only placements in the home.
- b. No child will be in a placement that will result in more than two (2) children under the age of two (2) residing in a foster home including the children of the caregiver's family.

Group Care or CCI Settings

- a. No child younger than twelve (12) years of age (0-11) will be placed in a group care setting. EXCEPTION: An age-based waiver shall be granted before a child age 10 and under can be placed in a congregate care or group home setting. For a child age 11, the Regional Director shall make the age-based waiver approval decision. For a child age 10 and under, the State Office Placement and Permanency Services Director or

designee shall make the age-based waiver approval decision. If the child is under the age of 10 and the child of a teen parent who is also placed in the CCI, an age-based waiver request is not required. The request should be submitted through www.gascore.com and must include a complete explanation of the supporting circumstances and concurrence from the County and Regional Director.

- b. No child under age twelve (12) that has been appropriately approved for a CCI placement will be placed in any group care setting that has a capacity in excess of twelve (12) children. This will not apply to a child who is under six (6) years of age (0-5) and who is also the son or daughter of another child placed in a group care setting.

NOTE: The Regional Director has night and weekend approval authority until the next business day for waivers requiring the Placement & Permanency Services Director or designee's approval.

Alternatively, there is no exception to this Standard for DJJ youth; the DJJ Office of Residential and Community Based Services does not grant capacity waivers.

- 4.9 Where co-placement of siblings is not possible, providers must assist the Division in ensuring that regular contact between siblings in care is maintained. (Please refer to Child Welfare Policy Manual 10.20 Preserving Sibling Connections.)

Alternatively, co-placement of siblings is not a principal issue for DJJ. This issue can be addressed with the DJJ CCM and DJJ RPS on an as needed basis.

- 4.12 Providers who offer MWO services must include Psychiatric Residential Treatment Facilities (PRTF) step-downs as part of their inclusion criteria. CPA's with MWO program designations must have a plan to develop foster homes that accept PRTF step-down placements. Children/youth stepping down from PRTF placements must meet the criteria for MWO services with the appropriate supportive services to maintain the placement. If a child/youth is 1013'd or admitted for treatment in any acute hospitalization or crisis stabilization setting, providers are expected to accept the child/youth back, either for long-term placement or a 10 day assessment period upon discharge from the inpatient behavioral, psychiatric or physical health setting. If the provider determines they are unable to meet the needs of the child/youth after the 10 day assessment timeframe and a discharge is necessary, they should provide the standard 14 day discharge notice to the County effective the 10th day of the assessment period.

Alternatively, if the provider determines they are unable to meet the needs of the youth after the 10 day assessment timeframe and a discharge is necessary, they should provide a minimum of 72 hours discharge notice to the placing RPS effective the 10th day of the assessment period.

- 4.16 Providers must provide youth with an age and developmentally appropriate orientation to their program. Orientation must include information on reporting personal boundary concerns,

bullying, violence or other concerns. Orientation must also include information on the agency's child ombudsmen. (See Standard 1.11)

Additionally, the orientation must also include information on the DJJ Office of Ombudsman. (See Standard 1.10)

Standard 5: Placement Stability

- 5.0 A Family Team Meeting (FTM) should be conducted when potential disruption of a child's placement is threatened or imminent, including children returning from runaway or hospitalizations where they will not return to the same placement. Providers must alert DFCS of the need to hold an FTM when children in their care may experience a placement disruption. Providers must participate in these FTMs as invited by DFCS. The child should be included when deemed appropriate.

Alternatively, the DJJ RPS may call for a collaborative staffing session when potential disruption of a youth's placement is threatened or imminent. Providers should alert the DJJ RPS of the need to hold a staffing session. The staffing session may occur face-to-face or via telephone conference. The youth should be included when deemed appropriate.

- 5.2 The decision for placement disruption is made only after all possible interventions to maintain the child in care have proven unsuccessful. Decisions about the child's long-term or continued placement in the program should not be made during a crisis. At best, a decision to discharge a child from a provider's placement should be made by mutual discussion between the provider and the Division concerning the child's situation, either in a face-to-face or telephone conference.

Additionally, the DJJ RPS must be included in any mutual discussion between the provider and the Department regarding a decision to discharge a youth from a placement.

- 5.5 DFCS must be provided with at least a 14 calendar day notice of the need to move a child from a CCI or CPA foster home unless there is an impending threat of harm to the child or others.

Alternatively, the DJJ RPS and DJJ CCM must be provided with a minimum of 72 hour notice for any unplanned discharges unless there is an impending threat of harm to the child or others.

- 5.6 In all cases where discharge is determined to be in the best interest of the child but due to safety issues a 14 day notice cannot be provided, a minimum of 72-hour notice shall be given prior to discharge. If the 72-hour notice is not possible, the reasons for the failure to notify in advance must be documented in the child's record.

Alternatively, the DJJ RPS and DJJ CCM must be provided with a minimum of 72 hour notice for any unplanned discharges. If the 72 hour notice is not possible, the reasons for the failure to notify in advance must be documented in the youth's record.

- 5.7 Providers must ensure that no child will be moved from one placement site or home to another without prior approval of DFCS and the execution of a new institutional placement agreement as appropriate. For children in the custody of Fulton or DeKalb counties, an FTM may be required prior to placement changes.

Alternatively, providers must ensure that no child will be moved from one placement site or home to another without prior approval from the DJJ RPS and DJJ CCM.

- 5.8 Providers must ensure that in situations where a child's discharge is the result of a determination that the placement is not safe or appropriate for the child or other children, any remaining child (ren) must be removed unless there is another written agreement with DFCS to correct the situation.

Alternatively, there are no exceptions to this Standard for DJJ youth; the DJJ Office of Residential and Community Based Services does not carry out written agreements in these situations and providers must ensure that any remaining DJJ youth are removed. The youth may only return once all deficiencies are addressed through a Corrective Action Plan and upon approval from the DJJ Office of Residential and Community Based Services.

Standard 6: Meeting Well-Being Needs

- 6.0 Providers must regularly assess the behavioral, social, emotional, psychological and physical needs of children placed and develop an initial ISP to address the child's needs. Providers must ensure that all well-being services identified in the ISP are provided and must document the frequency and results of the services.

Additionally, the DJJ RTSS will schedule Utilization Reviews (UR) at their assigned RBWO provider locations at least twice per year as outlined in DJJ Policy 20.24 Community Residential Programs. The purpose of the UR is to review the necessity, quality, effectiveness, and efficiency of services and procedures; a review will be held for each DJJ youth (unless the youth was admitted less than 30 days prior) to include the appropriateness of admission, services ordered and provided, length of stay, and discharge practices. The DJJ CCM will be in attendance and the DJJ Operations Support Manager (OSM) will attend when possible; the DJJ OSM will participate to address any needs as they relate to the DJJ Transition Plan and address any community resource barriers to a successful return to the community.

- 6.9 Providers must ensure that children are enrolled in a public school system or a GaDOE/LEA approved residential facility school within 2 days of placement. Providers must ensure that children have no more than five (5) unexcused absences per school year.

Alternatively, providers must follow the enrollment process for the DJJ Office of Education as outlined in DJJ Policy 13.22 Student Advisement. Students should be enrolled in an education program as soon as possible but no later than three (3) school days after placement; providers

must notify the DJJ CCM of youth enrollment. It is best practice that providers ensure students have no more than five (5) unexcused absences per school year.

6.10 Providers will ensure that appropriate educational services are provided and shall include the following:

- a. Documentation of the child's academic progress;
- b. Documentation of each child's attendance, courses and grades at the time of withdrawal from school;
- c. Immediate referral by the R.B.W.O. provider of the child to the appropriate educational agency, with the goal of placing each child in the educational program appropriate for his/her needs within 48 hours of admission to the R.B.W.O. provider;
- d. Monitoring of the child's educational progress through regular contact with the local school personnel;
- e. Participation in the annual Individualized Educational Plan (IEP) review and ensuring that any child determined to be eligible for special education has an IEP;
- f. Ensuring that every child age 14 and older receiving special education services has an IEP that includes a section on Transition Services and that those services are being provided;
- g. Notifying and inviting parents/guardians to attend any school-related conferences;
- h. Ensuring that any child who is experiencing difficulty in school is considered for assistance through the Student Support Team (SST);
- i. Providing and/or accessing vocational course work for each child determined to be eligible for vocational education and training;
- j. Providing and/or accessing GED preparation classes for each child who meets the state and local eligibility standards in order to qualify for GED testing; and
- k. For providers with on-grounds schools, the school programs must be operated in accordance with all requirements of the State Department of Education (see state law O.C.G.A. Section 20-2-133) and all applicable state and federal guidelines.

Additionally, providers that operate an onsite education program must adhere to the following standards:

- a. *Administrators and Teachers must hold a current Georgia Educators certificate issued through the Professional Standards Commission.*
- b. *The curriculum utilized must be the current curriculum adopted by the Georgia Department of Education.*
- c. *Students sixteen (16) years of age and older, meeting the minimum criteria for admission to a General Education Development (GED) program, may be enrolled in GED programming and must have access to current study materials and testing.*

- d. *The DJJ CCM and/or DJJ RPS, after consulting with the DJJ Director of Student Support Services, must give approval prior to enrolling students in an on-line or home school program, which constitutes a change of educational placement.*
 - e. *An appropriate special education program must be provided for students identified with disabilities, to include related services.*
 - f. *Students must have access to the Georgia State Mandated Assessments and the program must have a testing calendar available for review.*
 - g. *A separate education file must be maintained on each student to include: public school records, withdrawal forms, transcripts, grades and credits received through the program, and all special education related documents.*
- 6.12 For youth who are considering dropping out of school or pursuing a GED, providers must follow the policy outlined in the DFCS Child Welfare Policy Manual 10.13, Educational Needs (see appendix for link to DFCS Child Welfare Policy Manual).
- Alternatively, all DJJ youth must be enrolled in an education program while in placement unless they have already obtained their High School Diploma or GED. If a youth is considering GED and meets the minimum criteria for admission to a GED program, they may be enrolled in GED programming and must have access to current study materials and testing.*
- 6.20 Providers must conduct an Every Child Every Month (ECEM) contact every month (starting the first full month of placement) for each child placed. The ECEM contact must occur in the child's residence (foster home or CCI). The ECEM visit must be conducted by the CCI Human Services Professional or the CPA Case Support Worker or Case Support Supervisor. Prior to conducting any ECEM visits, the staff person must have completed the ECEM webinar training which is posted on www.gascore.com. A copy of the completion certificate must be maintained in the staff's personnel and/or training file.

The documentation of the visit must be uploaded via the SHINES Portal within 72 hours of the contact. ECEM documentation includes the following:

- a. Developmental, social, emotional progress and challenges
- b. Progress on Individual Service Plan goals
- c. Child's involvement in the permanency case plan
- d. Issues pertinent to safety, permanency and well-being
- e. Any concerns or red flags
- f. Any need for follow-up and next steps.

Additional information on conducting and documenting ECEM contacts is posted at www.gascore.com.

Alternatively, providers will support the DJJ CCM with maintaining contact with the youth and their parent(s)/guardian(s) throughout their time in RBWO placement. (See Standard 1.6)

- 6.25 Providers must develop and implement a policy on providing age and development appropriate sex education geared toward empowering youth to self-protect and report personal boundary violations. The policy must include a protocol for addressing incidents of sexual activity, violence, and coercion. {P.R.E.P. program information in the Definitions appendix may be of assistance to providers.}

Additionally, providers, to include any subcontractors, will comply with the Prison Rape Elimination Act (PREA) of 2003 {Federal Law 42 U.S.C.15601 et seq.}, and with all applicable PREA Standards, Department Policies related to PREA and Department Standards related to PREA for preventing, detecting, monitoring, investigating, and eradicating any form of sexual abuse within Department Facilities/Programs/Offices owned, operated or contracted. (See Standard 1.11}

- 6.26 CPAs and CCI's must follow the Reasonable and Prudent Parenting Standard (RPPS).
- a. CCI must have a staff person identified as the caregiver who will be responsible for such decisions.
 - b. At least one agency staff (HSP or higher) must attend the OPM RPPS "Train-the-Trainer" course. Providers must ensure that this trained staff member in turn provides RPPS training to all other staff.
 - c. Providers must have a RPPS policy; however, this provider policy shall in no way diminish or circumvent DFCS RPPS policy. Caregivers must also be trained in RPPS and the curriculum is available on www.gascore.com.
 - d. Each youth has regular and ongoing opportunities to engage in developmentally appropriate activities.
 - e. Providers must have a routine process of consulting with children to determine if the children's input regarding having regular opportunities to participate in age appropriate activities.
 - f. Providers must mark an annual check box in GA+SCORE that indicates that the RPPS policy is operating as intended.

Additionally, parent(s)/guardian(s) of DJJ youth should be actively engaged in the youth's treatment and planning; this should be taken into consideration when following the RPPS.

- 6.27 Providers servicing youth ages 14 years and over must adhere to the Youth Rights and Responsibilities (Child Welfare Policy 13.7). Providers must have a Youth Rights and Responsibilities policy, consistent with Child Welfare Policy, and are required to train the agency's employees, volunteers, and caregivers on this policy. Curriculum is available on www.gascore.com for facilitators that have attended a train the trainer session.

Additionally, providers must adhere to DJJ's Basic Expected Treatment Standards and Responsibilities of Youth. Youth, staff, and the general public may report any violation of a youth's rights to DJJ's Office of Legal Services in writing to 3408 Covington Highway, Decatur,

Georgia, 30032. (See Appendix B for the Basic Expected Treatment Standards and Appendix C for the Responsibilities of Youth}

Standard 7: Least Restrictive and Most Appropriate Placements

- 7.0 Providers must initiate the step-down process for children to less restrictive placements as they meet their service goals and their needs change. Providers must notify the DFCS case manager and the Placement Resource Operations (PRO) Unit at www.gascore.com for a review of the child's program designation as indicated. Step-downs may occur within a provider's own service continuum or to other providers who offer the less restrictive and/or less intensive services.

Alternatively, providers will initiate the step-down process for youth to less restrictive placements as they meet their service goals and their needs change by notifying the DJJ RPS, DJJ CCM, and DJJ RTSS of the need for a review of the child's program designation; no step-down placements should occur without discussion and approval by the DJJ RPS and DJJ CCM. For DJJ sexually harmful youth, the DJJ CCM will present the youth's case to the DJJ Sexually Harmful Behavior Review Panel for recommendations regarding placement options as outlined in DJJ Policy 20.36 Supervision of Sexually Harmful Youth in the Community. Step-downs may occur within a provider's own service continuum or to other providers who offer less restrictive and/or less intensive services.

- 7.3 In partnership with DFCS, providers must make reasonable efforts to place siblings together in the same placement. All siblings in foster care must be placed together, except under specific circumstances when such a joint placement would be contrary to the safety or well-being of any of the siblings. If siblings must be placed separately, efforts must be made to ensure frequent visitation unless visitation is contrary to the safety and well-being of any of the siblings as documented by a licensed professional and approved by the custodial county's director/designee. (See Child Welfare Policy Manual 10.20 and Standards 3.10 and 8.0)

Alternatively, co-placement of siblings is not a principal issue for DJJ youth. This issue can be addressed with the DJJ CCM and DJJ RPS on an as needed basis.

Permanency Support

Standard 8: Achieving Permanency

- 8.3 Providers must attend/participate when invited to an FTM, Multi-Disciplinary Team (MDT) meetings, Juvenile Court Reviews, Citizen Panel Reviews, and transitional discharge planning meetings as requested by the Division.

Alternatively, providers must attend/participate in Utilization Reviews or case staffing sessions as requested by the Department as well as Juvenile Court Reviews when subpoenaed.

- 8.4 Providers must have contact with the child's birth parents, guardian or other permanency person (EPEM—Every Parent Every Month) in order to support the DFCS case plan unless, in accordance with the DFCS case manager, the provider is not expected to conduct EPEM contacts. The frequency, type, mode and purpose of the contacts must be negotiated with the DFCS case manager. Within the first 30 days of placement, providers must communicate with DFCS to understand each individual child's permanency plan, the DFCS EPEM plan and to establish the provider's EPEM plan. The provider's EPEM plan should be updated when the ISP is updated, when the DFCS case plan or EPEM plan is changed or when events dictate. If in accordance with the DFCS CM, the provider is not required to conduct EPEM contacts, this must be documented in the child's case record.

Alternatively, providers must ensure that DJJ youth have at least two (2) forms of contact with their parent(s), guardian(s), or family per month; contacts may be in the form of a face-to-face visit, telephone call, and/or video conference. Youth shall also be permitted offsite and/or overnight passes; any pass requests must be in accordance with the following:

- a. Sexually harmful youth will not be allowed overnight passes. Any offsite pass requests for sexually harmful youth must be handled as outlined with DJJ Policy 20.36 Supervision of Sexually Harmful Youth in the Community. (See Appendix J for the Off-Site and Supervision Plan for Sexually Harmful Youth)*
- b. Request for offsite and/or overnight passes for stepdown youth will be handled as outlined in DJJ Policy 18.8 Transition of Class B Designated Felons from Secure Placements. (See Appendix J for the Pass Request for Youth in Residential Programs)*
- c. For all other youth, offsite and/or overnight passes will be handled as outlined in DJJ Policy 20.24 Community Residential Programs. (See Appendix J for the Pass Request for Youth in Residential Programs)*

Standard 9: Planned Discharges and Continuity of Care

- 9.0 Discharge planning must begin at the beginning of admission to the provider and is reflected in the initial ISP. Placement disruptions are unplanned changes whereas discharges are planned transitions to less restrictive placements, more appropriate placements or to permanency.

Additionally, prior to the youth entering placement, the DJJ CCM will develop a DJJ Transition Plan and the DJJ RPS will include the DJJ Transition Plan in the RBWO referral packet as outlined in DJJ Policy 20.24 Community Residential Programs. Providers will integrate the DJJ Transition Plan into any supplemental plans (e.g. ISP) created for the youth.

- 9.1 The DFCS case manager and the provider including any subcontractors must participate in a team meeting prior to discharge for all children placed by Fulton or DeKalb County.

Alternatively, there is no variation in the admission process for Fulton or DeKalb County youth for DJJ.

Standard 10: Preparation for Independent Living

- 10.0 Providers who care for youth ages 14 years and up will develop an Individualized Skills Plan based upon the Casey Life Skills Assessment (CLSA). The Individualized Skills Plan is a supportive component to the DFCS Written Transitional Living Plan (WTLP). The Individualized Skills Plan must be updated every six months.

Alternatively, providers who care for DJJ youth ages fourteen {14} and up will develop an ISP based upon the CLSA. The DJJ Service Plan and ISP are supportive components of the DJJ Transition Plan. The ISP must be updated every six months by the provider and the DJJ Service Plan will be updated every 90 days by the DJJ CCM. Providers will integrate the DJJ Service Plan and DJJ Transition Plan into any supplemental plans created for the youth.

- 10.2 Providers must provide a monthly Independent Living report on each youth's progress on their Individualized Skill Plan to the DFCS Independent Living Specialist (ILS) and DFCS Case Manager by the 10th day of the following month.

Alternatively, providers will prepare and submit a monthly progress report to the DJJ RPS and DJJ CCM by the 5th day of each month detailing the services provided to the youth and the progress being made by the youth in achieving the goals as outlined in the DJJ Service Plan and ISP. Such reports will be signed and dated by the Human Services Professional and the Program Manager/Director. {Please see Appendix J for the DJJ RBWO Monthly Progress Report}

- 10.4 Providers must provide independent living services to support the youth's Individualized Skills Plan directly and/or ensure that youth participate in county or other independent living services. Independent Living programming includes:

- Housing and community resources to assist youth in making a positive transition to the community, including housing, transportation and community resources.
- Money management to help youth make sound decisions, both now and in the future. This includes exploring beliefs about money, information about savings, income tax, banking, credit, budgeting, spending plans and consumer skills.
- Self-care to include skills to promote a youth's physical and emotional development: personal hygiene, health, drugs and tobacco education, and information about human sexuality and making safe choices.
- Social development focusing on relating to others now and in the future. This includes personal development, cultural awareness, communication, relationship education and training.
- Work and study skills to address the skills needed to help youth complete their educational programs and pursue careers of interest. This includes career planning, employment, decision making and study skills.

Additionally, all DJJ youth fourteen {14} and older must be provided some form of independent living skills training by the RBWO/residential program to include but not limited to – managing money, building credit, applying for a job, finding an apartment, interviewing, etc. If the DJJ Office of Federal Programs {OFP} deems the provider's independent living curriculum is

insufficient, OFP will provide an online resource to the provider to supplement their program's existing independent living curriculum.

- 10.5 The provider must develop, amend, or revise with the youth a special Individualized Skills Plan (a supportive component to the WTLF) within 90 days of a youth turning 18 years. DFCS is required to facilitate a Transitional Round Table (TRT) within this same timeframe to develop, amend or revise the WTLF. If the provider has not already been invited to the TRT, with 180 days of the youth turning 18 years, the provider should inquire as to the TRT plan with the DFCS case manager and IL Specialist. The provider's ISP can be developed with DFCS at the TRT (preferred) or independently if necessary. (See DFCS Child Welfare Manual Policy 13.3)

Alternatively, the provider must develop, amend, or revise with the youth a special ISP (a supportive component of the DJJ Transition Plan) within 90 days of a youth turning 18 years old. The provider's ISP should be developed with the DJJ CCM, DJ RPS, and DJJ OSM through a collaborative staffing session.

Family Foster Homes

Standard 11: CPA Family Foster Homes Meet DFCS Minimum Standards

- 11.3 CPAs must have a written description of their pre-service and on-going training program for caregivers. The training program should be reviewed and updated periodically to reflect the changing needs of children and families. The pre-service training program must be approved by DFCS.

Alternatively, there is no approval process through the DJJ Office of Residential and Community Based Services for the pre-service training program; however, CPAs must have a written description of their pre-service and on-going training program for caregivers. The training program should be reviewed and updated periodically to reflect the changing needs of children and families.

- 11.12 CPAs must ensure that their foster parents, who provide services to foster children in the custody of DFCS, are paid timely. CPA providers must have a written policy regarding foster parent payments that outline these payment dates. CPA providers must pay the foster parent the total amount of the foster parent supplemental per diem as outlined in the child's RBWO program designation memo.

Alternatively, CPAs must ensure that their foster parents, who provide services to youth in the care of DJJ, are paid timely. CPA providers must have a written policy regarding foster parent payments that outline these payment dates. CPA providers must pay the foster parent the total amount of the foster parent supplemental per diem as outlined in the youth's funding memo.

- 11.13 CPAs must ensure that children are removed from foster homes and will not be placed in foster homes where there has been a finding by the Division that the foster parent is the perpetrator

of substantiated abuse or neglect or whose violation of a DFCS policy has threatened the safety of the child. The only exception is where the home has been determined by the DFCS state office review to be in the best interest of the child/children in the home. A written waiver must be in the case file as well as a plan of correction to alleviate the safety concerns.

Alternatively, there are no exceptions to this Standard; the DJJ Office of Residential and Community Based Services does not grant or approve any placement waivers.

- 11.14 CPAs must ensure that the number of children placed in their foster homes complies with the following requirements:
- a. No child in the custody of DFCS may be placed in a foster home if that placement will result in more than three (3) foster children in that home or, a total of six (6) children in the home, including the foster family's biological and/or adopted children without the written approval of the Placement and Permanency Services Director.
 - b. No child in the custody of DFCS may be placed in a foster home if that placement will result in more than three (2) children under the age of three (2) residing in a foster home.

Alternatively, there are no exceptions to this Standard; the DJJ Office of Residential and Community Based Services does not provide written approvals.

- 11.26 If a CPA suspects or is notified that a caregiver may have violated a safety, behavior management, quality of care, well-being or other such policy, the suspected violation must be reported to and screened by the CPS Centralized Intake Call Center. Whether or not the report is investigated by CPS, providers must complete a Policy Violation Assessment (PVA) related to the issue and develop a Corrective Action Plan (CAP) with the caregiver as appropriate following the policy outlined in DFCS Child Welfare Policy Manual Chapter 14.22. Care should be taken to avoid interfering with any related CPS and/or law enforcement investigations. For violations that the Office of Provider Management becomes aware of, providers will be notified via a GA+SCORE generated e-mail of the need to complete a PVA. Completed PVAs must be uploaded into GA SCORE by the provider within 15 days of receiving the CPS notification. OPM will in turn review the PVA and provide feedback to the provider within 10 days. Any required CAPs must be uploaded into the Corrective Action tab in GA+SCORE within 3 days of notification. Appeals to OPM'S PVA determinations should be directed to the OPM Director by the provider within 10 days of notification. The OPM Director will review the appeal and reply to the provider within 15 days. Providers who display a pattern of not submitting PVA's and CAP's by the designated deadline are subject to an admission suspension.

Additionally, providers must report the violation by following their Incident Reporting procedure and all incident reports shall be forwarded to the appropriate DJJ CCM, DJ RTSS, and DJ RPS/Case Expeditor within 24 hours of the incident. The DJJ RTSS will review the violation and, if deemed appropriate, the RTSS will provide a Deficiency Report to the provider; all deficiencies

must be addressed by the requested due date through a Corrective Action Plan with the caregiver. If the provider wishes to appeal the Deficiency Report, they must follow the appeal process as outlined in DJJ Policy 20.24 Community Residential Programs. (Please see Appendix D for the DJJ Scorecard and Appeal Process and Appendix E for the Administrative Appeal Procedures)

- 11.28 Children with a Specialty program designation have intensive needs and require significant levels of care and supervision. Therefore, children who have a Specialty Watchful Oversight program designation --Specialty Base (SBWO), Specialty Maximum (SMWO) and Specialty Medically Fragile (SMFWO)—must be the only placement in the foster home. This includes respite for the Specialty designation child or another child coming into the Specialty home for respite. Any exceptions to this standard (whether for respite or placement) must be approved in advance of the placement by the Placement Resource Operations Unit. Waiver requests should be sent to www.gascore.com and include a complete explanation of the supporting circumstances and concurrence from all children's DFCS Case Manager(s).

Alternatively, there are no exceptions to this Standard; the DJJ Office of Residential and Community Based Services does not grant or approve any placement waivers.

- 11.33 CPA providers must regularly assess children's clothing needs. Funding for clothing is not included in the CPA per diem. The DFCS case manager should be notified when children do not have adequate, season-appropriate clothing suitable for the child's age, gender, size and individual needs, and to determine if the child is eligible for a clothing allowance. CPAs should also consider creating community or other resources to address clothing issues. CPA's requesting reimbursement must submit receipts for clothing within three (3) months of purchase.

Alternatively, CPA providers must regularly assess youth's clothing needs. Funding for clothing is not in the CPA per diem. The DJJ RPS should be notified when children do not have adequate, season-appropriate clothing suitable for the youth's age, gender, size, and individual need, and to determine if the youth is eligible for a clothing voucher. CPAs should also consider creating community or other resources to address clothing issues. CPA's requesting reimbursement must submit receipts for clothing to the DJJ RPS within thirty (30) days of purchase.

- 11.34 Foster homes must be placed on hold to additional placements during CPS investigations. The Office of Provider Management must be notified of any CPS investigation as soon as possible. OPM will place the home on hold in GA+SCORE and GA SHINES. At the conclusion of the investigation, the provider must contact OPM so that the foster parent's continued eligibility for placements can be ascertained.

Additionally, notification must be made to the DJJ RTSS and via the Residential Emergency Phone List of any CPS investigation as soon as possible. At the conclusion of the investigation, provider

must contact the DJJ RTSS so that the foster parent's continued eligibility for placements can be ascertained.

Child Caring Institutions

Standard 12: Child Caring Institutions

- 12.17 Children placed in CCIs may be eligible for an initial (i.e. at entry into foster care) clothing allowance if the initial allowance has not already been expended. Providers should discuss eligibility for initial clothing allowance with the DFCS case manager. CCI providers must continually ensure that children have an adequate amount of clothing to last until the next wash cycle (wash cycle/days should be documented and posted in an area available for the child's viewing). Adequate clothing can be defined as clean and available clothing for each day of the week, season-appropriate clothing suitable for the child's age, gender, size and individual needs. Children should be involved in shopping and selecting their clothing whenever possible. Funding for clothing other than the initial allowance is included in the CCI per diem.

Alternatively, youth placed in CC/s may be eligible for an initial clothing voucher. Providers should discuss eligibility for initial clothing voucher with the DJJ RPS. CCI providers must continually ensure that children have an adequate amount of clothing to last until the next wash cycle (wash cycle/days should be documented and posted in an area available for the child's viewing). Adequate clothing can be defined as clean and available clothing for each day of the week, season-appropriate clothing suitable for the child's age, gender, size, and individual needs. Children should be involved in shopping and selecting their clothing whenever possible. Funding for clothing other than the initial voucher is included in the CCI per diem.

- 12.20 In addition to providing activities on site, the provider shall utilize the community's cultural, social, and recreational resources whenever possible and appropriate. If children are participating in a community program, the provider must ensure that the program has sufficient and appropriate supervision for the children in attendance or provider staff will supplement the supervision as necessary to achieve an adequate level.

Additionally, for sexually harmful youth, all leisure activities and supervision during leisure activities must be performed in accordance with the youth's DJJ Safety Plan.

- 12.35 If a CCI suspects or is notified that a staff member may have violated a safety, behavior management, quality of care, well-being or other such policy, the suspected violation must be reported to and screened by the CPS Centralized Intake Call Center. Whether or not the report is investigated by CPS, providers must complete a Policy Violation Assessment (PVA) related to the issue and develop a Corrective Action Plan (CAP) with the caregiver as appropriate following the policy outlined in DFCS Child Welfare Policy Manual Chapter 14.22. Care should be taken to avoid interfering with any related CPS and/or law enforcement investigations. For violations that the Office of Provider Management becomes aware of, providers will be notified via a

GA+SCORE generated e-mail of the need to complete a PVA. Completed PVAs must be uploaded into GA SCORE by the provider within 15 days of receiving the CPS notification. OPM will in turn review the PVA and provide feedback to the provider within 10 days. Any required CAPs must be uploaded into the Corrective Action tab in GA+SCORE within 3 days of notification. Appeals to OPM's PVA determinations should be directed to the OPM Director by the provider within 10 days of notification. The OPM Director will review the appeal and reply to the provider within 15 days. Providers who display a pattern of not submitting PVA's and CAP's by the designated deadline are subject to an admission suspension.

Additionally, providers must report the violation by following their Incident Reporting procedure and all incident reports shall be forwarded to the appropriate DJJ CCM, DJJ RTSS, and DJJ RPS/Case Expeditor of the incident. The DJJ RTSS will review the violation and, if deemed appropriate, the RTSS will provide a Deficiency Report to the provider; all deficiencies must be addressed by the requested due date through a Corrective Action Plan with the caregiver. If the provider wishes to appeal the Deficiency Report, they must follow the appeal process as outlined DJJ Policy 20.24 Community Residential Programs. (See Standard 11.26)

General Administrative Matters

Standard 13: Provider Operations

- 13.3 Providers must notify OPM of any change of address, telephone contacts, administrator/executive director, staff roster (including administrative assistants and part-time staff), admissions contact, GA+SCORE reporting contact and after-hours contact via the GA+SCORE system within 48 hours of the change. There must be at least two (2) distinctly identified staff with different contact information listed in GA+SCORE at all times.

Additionally, providers must notify their DJJ RTSS, the DJJ Office of Contracts, and the DJJ Director of the Office of Residential and Community Based Services of any change of address, telephone contacts, administrator/executive director, staff roster (including administrative assistants and part-time staff), admissions contact, and after-hours contact. Providers must send their current staff rosters to their assigned DJJ RTSS and to community.provider@djj.state.ga.us by the 5th day of each month.

- 13.4 Providers must notify OPM of changes to policies and procedures that significantly impact the delivery of services or programmatic changes (i.e. gender or ages served).

Additionally, providers must notify their DJJ RTSS of changes to policies and procedures that significantly impact the delivery of services or programmatic changes (i.e. gender or ages served).

- 13.6 Providers must comply with all requests for information and records for use in and to participate, as requested, in the annual Time Study and Cost Report, including, but not limited to providing OPM with a copy of the provider's Annual Independent Audit Report, and to comply

with all requests made by the Division to assist it in its efforts to obtain payment or recovery of costs of R.B.W.O services from third parties.

Additionally, providers must comply with the standards set forth in their DJJ contract regarding annual cost reports. Also, the DJJ RTSS will coordinate a minimum of two (2) site visits during a calendar year to all providers; there will be a minimum of one (1) announced and one (1) unannounced audit per calendar year. A public scorecard will be assessed based on the audits and the formula established by DJJ. The DJJ Scorecards are published on the public DJJ website. Provider may appeal the DJJ Audit Summary Report utilizing the appeal process outlined in DJJ Policy 20.24 Community Residential Programs. {Please see Appendix D DJJ Scorecard and Appeal Process and Appendix E Administrative Appeal Procedures}

- 13.7 Providers must provide to OPM such data and reports as it requests for use in developing baselines and other reports or review processes to promote improvement in performance under these requirements and in any other area related to the services provided to children placed by DFCS in the following areas: child health and safety, family and community involvement, permanency, functioning levels, placement stability, and reentry to care.

Additionally, providers must provide mid-year outcome data (due yearly by January 30th) to support performance metrics for the service deliverables. Reports should be provided to the Director of the Office of Residential and Community Based Services.

- 13.9 Providers must employ an adequate number of qualified staff to provide the necessary services (See Staffing Standards).

Additionally, the Program Director and the Human Services Professional must meet the following minimum work hours per week for all levels of RBWO:

- *Program Director: Minimum of 29 hours per week*
- *Human Services Professional: Minimum of 29 hours per week*

- 13.22 Providers will upload Monthly Summary Reports on each child to the documents tab in the SHINES Portal by the 10th day of the following month. Monthly summaries should be completed for each child regardless of duration of placement for that month. See GA SHINES Provider Portal User Guide for instructions on uploading documents.

Alternatively, providers will prepare and submit a monthly progress report to the DJJ RPS and DJJ CCM by the 5th day of each month detailing the services provided to the child and the progress being made by the child in achieving the goals as outlined in the DJJ Service Plan and ISP, if applicable. Such reports will be signed and dated by the Human Services Professional and the Program Manager/Director. {Please see Appendix J for the DJJ RBWO Monthly Progress Report}

- 13.25 All foster care records must be maintained until the child has reached age 23 years. If a provider agency closes or ceases to contract for RBWO placements in the meantime and needs assistance with record storage, OPM should be contacted for assistance.

Alternatively, all DJJ youth case files must be retained to the end of the calendar year that youth reaches age 23. If a provider agency closes or ceases to contract for RBWO placements in the meantime, DJJ should be contacted for record storage.

- 13.26 No child placed in the Division's custody is allowed to go home with any staff or employee member of the agency where that staff person or employee is not a duly approved foster parent. Any special circumstances must be discussed with OPM.

Alternatively, there are no special circumstances in this instance made by Office of Residential and Community Based Services.

- 13.29 Providers must have and implement a policy on supporting children and youth's safety on the internet and use of social media. The policy must include training of staff and caregivers on internet safety and providing age-appropriate information to children and youth regarding internet safety. This policy should also include the accessibility and usage of cellphones.

Additionally, for sexually harmful youth, all internet use must be supervised and must be performed in accordance with the youth's DJJ Safety Plan.

- 13.31 RBWO standards and contract deliverables may only be waived by the OPM Director. Waivers from RCCL and/or county or regional DFCS directors are not valid waivers of RBWO standards or deliverables.

Alternatively, the Office of Residential and Community Based Services does not grant waivers for RBWO standards or contract deliverables; any RBWO standards waived by OPM must be reviewed by the DJJ Director of the Office of Residential and Community Based Services.

- 13.35 If existing CSS, CSW and HSP staff members have not completed RBWO Foundations training within the four (4) month deadline, they must be reassigned to roles other than CSS, CSW or HSPs until the training is successfully completed. Agencies identified as systematically failing to ensure that staff meets training requirements are subject to admissions suspension and OPM contract termination.

Additionally, agencies identified as systematically failing to ensure that staff meets training requirements are subject to admissions suspension and DJJ contract termination.

- 13.36 Provider will comply with all the contract deliverables, OPM RBWO Minimum Standards, DJJ's RBWO Minimum Standards Amendment, and DFCS Child Welfare Policies. Failure to comply will result in:
- Intervention from the OPM Risk Management Team (site visit, technical assistance, office conference, etc.),
 - Letter of Concern,
 - Admission suspensions, and/or
 - Termination of contract.

Additionally, provider will comply with all of the DJJ contract deliverables, the DJJ RBWO Minimum Standards Amendment, and DJJ Policies. Failure to comply will result in:

- *Intervention from DJJ Office of Residential and Community Based Services,*
- *Letter of Concern,*
- *Admission suspensions, and/or*
- *Termination of contract.*

- 13.41 A Director shall not serve in the capacity of any RBWO role for more than one agency that is under contract with the Department of Human Services as an R.B.W.O. provider.

Additionally, a Director shall not serve in the capacity of any RBWO role for more than one agency that is under contract with the Department of Juvenile Justice as an RBWO provider.

Transitional Living Minimum Standards

Standard 14: TLP Admissions

- 14.2 Providers must maintain an up to date roster on GA+ SCORE.

Additionally, providers must send their current staff rosters to their assigned DJJ RTSS and to community.provider@djj.state.ga.us by the 5th day of each month.

- 14.3 Providers must determine whether youth will be accepted or denied admission within three business days of a completed application.

Alternatively, providers will provide written notice on their agency's letterhead regarding acceptance or denial within three (3) business days of referral. If decision requires an interview as part of the admission process, then acceptance or denial and interview must be conducted within five to seven (5-7) business days.

- 14.5 All youth entering TLP must have a staffing within the first 30 days of placement, which must include the youth, DFCS Case Manager and other supports. The ILS should be invited. The purpose of the staffing is to review expectations, the WTLP and TLP ISP.

Alternatively, all youth entering TLP must have a staffing within the first 30 days of placement, which must include the youth, parent(s)/guardian(s) (if applicable), DJJ CCM, DJJ RPS, DJJ OSM and other supports. The purpose of the staffing is to review expectations, the DJJ Transition Plan, the DJJ Service Plan, and the TLP ISP.

Standard 15: TLP Supervision and Independence

- 15.0 TLP youth must have a documented assessment which supports their level of supervision.

Additionally, the documented assessment should include the youth's Placement Services Plan of Care and DJJ Safety Plan (if applicable); the level of supervision must be approved by the DJJ CCM.

- 15.1 The determined level of supervision must be incorporated into the ISP, which must be signed by the youth, DFCS Case Manager and Life Coach.

Alternatively, the determined level of supervision must be approved by the DJJ CCM and incorporated into the ISP, which must be signed by the youth, DJJ CCM, parent(s)/guardian(s) (if applicable), and Life Coach.

- 15.3 Youth in TLPs must be supervised under the same standards as general RBWO programs. However, TLP youth may be appropriate for graduated independence which outlines decreasing levels of supervision based upon the program objectives, the youth's maturity and other factors.

Additionally, for sexually harmful youth, graduated independence and decreasing levels of supervision must be approved by the DJJ CCM and performed in accordance with the youth's DJJ Safety Plan.

Standard 16: Independent Living Skill Building

- 16.0 Providers must utilize the DFCS Written Transitional Living Plan (WTLP) in the development of the youth's TLP Individual Skills Plan (TLP ISP). The TLP ISP must support the WTLP and be based upon the youth's needs, desires, Casey Life Skills Assessment (CLSA) and permanency plan. (The TLP ISP is the ISP for the TLP programs. All other standards for the ISP apply.)

Alternatively, providers must utilize the DJJ Transition Plan and DJJ Service Plan in the development of the TLP ISP. The TLP ISP must support the DJJ Transition Plan and be based upon the youth's needs, desires, and CLSA. All other standards for the ISP apply.

- 16.2 The TLP ISP incremental steps or goals must include the following:
- Development of Permanency Pacts or other agreements with caring adult connections;
 - Living arrangements upon discharge from Extended Youth Support Services;
 - Educational and/or vocational planning; and
 - Any other goals or objectives which will assist the youth in being successful post discharge.

Alternatively, the TLP ISP incremental steps or goals must include the following:

- *Development of informal agreements between youth and supportive adult relationships that will be enduring;*
- *Living arrangements upon reentry from TLP;*
- *Educational and/or vocational planning; and*
- *Any other goals and objectives which will assist the youth in being successful upon reentry from TLP.*

- 16.3 Providers must submit a monthly summary of each youth's progress to the regional Independent Living Specialist (ILS) and the DFCS case manager by the 10th of the following month. The list of ILSs is located in Appendix G.

Alternatively, providers will prepare and submit a monthly progress report to the DJJ RPS and DJJ CCM by the 5th day of each month detailing the services provided to the child and the progress being made by the child in achieving the goals as outlined in the DJJ Service Plan and ISP, if applicable. Such reports will be signed and dated by the Human Services Professional/Life Coach and the Program Manager/Director. (Please see Appendix J for the DJJ RBWO Monthly Progress Report)

- 16.6 Youth should attend county/regional IL meetings unless there is a reason why it is not possible or practicable. Provider must document the reason in the monthly summary report to the ILS and DFCS Case Manager.

Alternatively, this is not a requirement for DJJ youth; however, DJJ youth may attend county/regional IL meetings if space and/or availability permits.

Standard 17: Permanency Planning

- 17.0 Providers must document supportive activities which assist youth with achieving their DFCS permanency goal.

Alternatively, providers must document supportive activities which assist youth in achieving their Independent Living Skills goals as outlined in their DJJ Service Plan and DJJ Transition Plan.

- 17.1 For youth with Another Planned Permanent Living Arrangement (APPLA) goals which includes emancipation, providers must include in the TLP ISP incremental steps or goals which include the following:

- Development of Permanency Pacts or other agreements with caring adult connections;
- Living arrangements upon discharge from foster care;
- Consideration of extending foster care services;
- Educational and/or vocational planning; and
- Any other goals or objectives which will assist the youth in being successful post discharge from foster care.

Alternatively, for youth with Another Planned Living Arrangement (APPLA) goals which includes emancipation, provider must include the TLP ISP incremental steps or goals which include the following:

- *Development of informal agreements between youth and supportive adult relationships that will be enduring;*
- *Living arrangements upon reentry from TLP;*
- *Educational and/or vocational planning; and*

- *Any other goals or objectives which will assist the youth in being successful upon reentry from TLP.*

- 17.2 Youth between the ages of 17 to 17 ½ must be provided with an orientation to benefits provided by the state Georgia Resilient, Youth-Centered, Stable, Empowered/Independent Living Program (GA RYSE/ILP), community resources as well as any other public assistance benefits such as food stamps, housing, or TANF.

Alternatively, the DJJ CCM and DJJ OSM can support youth with an orientation to community resources and any other public assistance benefits as needed.

Standard 18: Life Coaching

- 18.3 Life Coaches must have a written plan for each youth that includes at least bi-monthly face-to-face sessions with youth. The Life Coach plan may be a separate document or incorporated into the TLP ISP. Life Coaches must utilize the results of the youth's CLSA in the development of the TLP ISP and Life Coaching plan.

Additionally, Life Coaches must integrate the DJJ Transition Plan and DJJ Service Plan in the development of the TLP ISP and Life Coaching Plan.

Standard 19: TLP Outcome Measures

- 19.1 Providers must distribute reports for the contract year by July 30th annually (reports cover July 1-June 30). Reports should be provided to OPM, regional ILS and the state GA RYSE/IL Program Director.

Additionally, providers must provide mid-year outcome data (due yearly by January 30th) to support performance metrics for the service deliverables. Reports should be provided to the Director of the Office of Residential and Community Based Services.

Independent Living Program Minimum Standards

Standard 21: ILP Admissions

- 21.0 Admitted youth must be at least 18 years of age and have elected to participate in Extended Youth Support Services. Youth must be assessed by the provider to be invested in and able to benefit from ILP. Admissions criteria must include that youth must be employed at least part time (15-20 hrs. /week) or attending school full-time.

Alternatively, DJJ youth are not required to elect to participate in Extended Youth Support Services. All other admission criteria noted is applicable.

- 21.2 Providers must maintain an up-to-date roster on GA+SCORE.

Additionally, providers must send their current staff rosters to their assigned DJJ RTSS and to community.provider@djj.state.ga.us by the 5th day of each month.

- 21.3 Providers must determine whether youth will be accepted or denied admission within three business days of a completed application.

Additionally, providers will provide written notice on their agency's letterhead regarding acceptance or denial within three (3) business days of referral. If decision requires an interview as part of the admission process, then acceptance or denial and interview must be conducted within seven (7) business days.

- 21.4 Youth admitted into an ILP must have an orientation to the program. Youth should be provided with a handbook or other literature describing the program. The contact information for the Office of the Child Advocate must be included in the handbook or orientation packet. (See appendix)

Alternatively, the contact information for the DJJ Office of Ombudsman must be included in the handbook or orientation packet. (See Standard 1.10)

- 21.6 ILP Youth must sign an acknowledgement that they may be discharged from the ILP if they willingly and knowingly participate in illegal or disruptive behavior or it is determined that they are unable or unwilling to benefit from the program. All youth discharged for violating ILP rules must be given a 60 day notice and assistance with transition. Providers must create a written transition plan. A family team meeting must occur to discuss the youth's transition. The provider and the DFCS Case Manager will work collaboratively to identify placement options.

Alternatively, DJJ youth will sign Conditions of Placement developed by their DJJ CCM agreeing to comply and abide by the rules and regulations of the program as well as any federal, state, county, municipal laws or ordinances. The DJJ RPS and DJJ CCM must be provided with a minimum of 72 hour notice for any DJJ youth discharged for violating /LP rules.

- 21.7 All youth entering the ILP must have a staffing within the first 30 days of placement, which must include the youth, DFCS Case Manager, ILS and other supports. The purpose of the staffing is to review expectations, the WTLF and ILP ISP and to discuss the youth's eligibility for services and funding.

Alternatively, all youth entering the /LP must have a staffing within the first 30 days of placement, which must include the youth, parent(s)/guardian(s) (if applicable), DJJ CCM, DJJ RPS, DJJ OSM, and other supports. The purpose of the staffing is to review expectations, the DJJ Transition Plan, the DJJ Service Plan, the /LP ISP, and to discuss the youth's eligibility for services and funding.

Standard 22: ILP Supervision and Independence

- 22.2 Providers must develop a schedule for providing supervision based on a specific youth's maturity, acquired skills, and abilities. The supervisory schedule will be developed in collaboration with the youth and DFCS Case Manager. Supervision must be designed so that the provider may observe that the youth is practicing healthy life skills and decision-making. Supervision schedule should not conflict with the youth's class or work schedule.

Additionally, for sexually harmful youth, supervision must be performed in accordance with the youth's DJJ Safety Plan.

- 22.7 The provider must have a policy surround youth, ages 18-21, who are missing for 48 hours or more. The policy should include the agency's procedure for reporting the youth missing, steps taken to locate the youth, and debriefing procedures after the youth has been located. Debriefing should be held with the youth and DFCS. Documentation of the debriefing should be maintained in the youth's record.

Alternatively, any missing youth will be considered a runaway. Providers must notify the Department immediately but no later than one hour via the Residential Emergency Phone List and follow their Incident Reporting procedure for youth who are considered runaways or otherwise absent without permission. (See Standard 1.11)

Standard 23: Independent Living Skill Building

- 23.0 Providers must develop an ILP Individual Service Plan (ILP-ISP). The ILP-ISP must be based upon the youth's needs, desires, Casey Life Skills Assessment (CLSA) and future goals and objectives. All other standards for the ISP apply.

Additionally, providers must integrate the DJJ Transition Plan and DJJ Service Plan in the development of the /LP ISP.

- 23.2 The ILP ISP incremental steps or goals must include the following:
- Development of Permanency Pacts or other agreements with caring adult connections;
 - Living arrangements upon discharge from Extended Youth Support Services;
 - Educational and/or vocational planning; and
 - Any other goals or objectives which will assist the youth in being successful post discharge.

Alternatively, the /LP ISP incremental steps and goals must include the following:

- *Development of informal agreements between youth and supportive adult relationships that will be enduring;*
- *Living arrangements upon reentry from /LP;*
- *Educational and/or vocational planning; and*
- *Any other goals or objectives which will assist the youth in being successful upon reentry from /LP.*

- 23.4 Providers must submit a monthly summary of each youth's progress to the assigned Independent Living Specialist (ILS) and the DFCS Case Manager by the 10th of the following month. The list of ILSs is located in Appendix G.

Alternatively, providers will prepare and submit a monthly progress report to the DJJ RPS and DJJ CCM by the 5th day of the month for the previous month's services. Such report will be signed and dated by the Human Services Professional/Life Coach and the Program Manager/Director. (See Appendix J for the DJJ RBWO Monthly Progress Report)

Standard 24: Single Occupancy Housing

- 24.0 Providers must assist the youth in securing appropriate, single occupancy housing by the 13th month of participation in the program. Single occupancy housing is defined as a youth living alone or with a roommate of their choice and sharing the cost of living expenses.

Alternatively, DJJ youth are not required to be in single occupancy housing by the 13th month of participation in the program. DJJ youth will only be placed in single occupancy housing on a case by case basis and only after receiving approval from the DJJ CCM and DJJ RPS.

- 24.1 Independent living placements may be offered through a variety of residential on-campus living arrangements where youth have the opportunity to practice independent living skills with decreasing degrees of care and supervision. Youth must be in single occupancy housing by the 13th month of participation in the program.

Alternatively, youth may be placed in single occupancy housing by the 13th month of participation in the program only after receiving approval from the DJJ CCM and DJJ RPS.

Standard 25: Life Coaching

- 25.3 Life Coaches must have a written plan for each youth and have at least weekly face-to-face sessions. The Life Coach plan may be a separate document or incorporated into the ILP ISP.

Additionally, Life Coaches must integrate the DJJ Transition Plan and DJJ Service Plan in the development of the ILP ISP and Life Coaching Plan.

Standard 26: Financial Independence

- 26.6 Start-up cost for youth's Single Occupancy housing will be provided in accordance with DFCS Child Welfare Policy 13.11. All start-up costs must be pre-approved by the Regional ILS. Start-up costs are limited to the following:
- First month's rent, security deposits, renter's insurance, startup utility and telephone connection fees (NO cable or satellite television installation fees are allowable).
 - Basic furniture items (bed, chest of drawers, table and chairs)
 - Cooking and cleaning supplies

Alternatively, DJJ does not provide any start-up cost for single occupancy housing. The DJJ OSM can assist in locating some community resources to address/fulfill any start-up needs.

Standard 27: Outcome Measures

- 27.1 Providers must distribute reports for the contract year by July 30th annually (reports cover July 1-June 30). Reports should be provided to OPM, regional ILS and the GA RYSE/ILP Program Director.

Additionally, providers must provide mid-year outcome data (due yearly by January 30th) to support performance metrics for the service deliverables. Reports should be provided to the Director of the Office of Residential and Community Based Services.

Standard 28: General Administrative

- 28.0 Providers must contact the DFCS Case Manager immediately when significant issues or incidents occur and the issue/incident is severe enough to risk a youth's loss of the independent living placement (e.g., apartment) or the issue/incident creates a danger to the youth.

Alternatively, notification must be made immediately but no later than one hour via the Residential Emergency Phone List and Incident Reporting procedure when significant issues or incidents occurs and the issue/incident is severe enough to risk a youth's loss of independent living placement or the issue/incident creates a danger to the youth.

- 28.1 Providers must notify the Office of Provider Management whenever significant events occur relating to the safety or well-being of IL youth or relating to the IL program.

Additionally, providers must notify the Department whenever there is a Significant Event; Significant Events for DJJ youth are also inclusive of runaways, new legal charges, Prison Rape Elimination Act (PREA) incidents, abuse, neglect, exploitation, and any incidents which have the potential for incurring legal liability or adverse publicity. Notification must be made immediately but no later than one hour via the Residential Emergency Phone List the Residential Emergency Phone List and Incident Reporting procedure. (See Standard 1.11)

Maternity Program Minimum Standards

Standard 29: MP Admissions

- 29.0 Admitted youth must be at least 12 years of age with any permanency plan and have been assessed by a physician as being pregnant.

Alternatively, the DJJ Transition Plan will serve as the permanency plan for DJJ youth. All other admission criteria noted is applicable.

- 29.2 Providers must document all referrals including the reasons for admittance or denial into the MP. Providers must determine whether youth will be accepted or denied admission within three (3) business days of a completed application.

Additionally, providers will provide written notice on their agency's letterhead regarding acceptance or denial within three (3) business days of referral. If decision requires an interview as part of the admission process, then acceptance or denial and interview must be conducted within seven (7) business days.

Standard 30: MP Supervision and Oversight

- 30.2 Youth in MPs must be supervised under the same standards as general RBWO programs. Youth may be assessed for graduated independence which outlines decreasing levels of supervision based upon the program objectives, the youth's maturity and other factors.

Additionally, for sexually harmful youth, graduated independence and decreasing levels of supervision must be approved by the DJJ CCM and performed in accordance with the youth's DJJ Safety Plan.

Standard 32: MP Staff Training

- 32.1 At a minimum, the orientation session should also review the following policies and procedures: grievance policies and procedures, child abuse and exploitation policies and procedures, reporting requirements for suspected cases of child abuse and sexual exploitation, diseases and serious injuries, procedures for handling medical emergencies, and managing use of medications by residents in care, infection control policies and procedures, appropriate behavior management and emergency safety interventions, and privacy and confidentiality of residents.

Additionally, the orientation session should also review PREA requirements and information on the DJJ Office of Ombudsman.

Standard 34: MP Medical Services

- 34.1 In the event of a medical or mental health emergency, medical attention should be sought immediately. The provider should encourage the youth to comply with medical advice. Regardless of age, the county of custody should be notified immediately of any occurrence of treatment and/or refusal of treatment.

Additionally, all medical emergencies should be reported to DJJ via the Residential Emergency Phone List and Incident Reporting procedure.

- 34.2 At admission, the provider shall secure a signed consent for medical treatment authorization form. The form shall be signed by the youth's guardian. The consent form should be filed in the youth's case file at the program site.

Additionally, the DJJ CCM will ensure that the youth's parent(s)/legal guardian(s) sign and complete the Community Medical Permission form granting the CCM permission to authorize mental health and medical-related services as necessary. In the event the provider/placement is unable to contact the youth's parent or legal guardian to obtain consent for medical mental health and medical related service of the youth, the CCM will be contacted as outlined in DJJ Policy 20.24 Community Residential Services.

Standard 35: MP Life Coaching

- 35.3 Life coaches must have a written plan for each youth and have at least weekly face-to-face sessions. The Life Coach plan may be a separate document or incorporated into the MP ISP/ Parenting Preparation & Life Skills Plan.

Additionally, Life Coaches must integrate the DJJ Transition Plan and DJJ Service Plan in the development of the MP ISP and Parenting Preparation & Life Skills Plan.

Parenting Support Program Minimum Standards

Standard 37: PSP Admissions

- 37.0 Admitted youth must be at least 12 years of age with any permanency plan and have at least one biological child with whom they provide care for. The provider should ascertain from DFCS whether the youth or DFCS has legal custody.

Alternatively, the DJJ Transition Plan will serve as the permanency plan for DJJ youth. All other admission criteria noted is applicable.

- 37.2 Providers must document all referrals including the reasons for admittance or denial into the PSP. Providers must determine whether youth will be accepted or denied admission within three (3) business days of a completed application.

Additionally, providers will provide written notice on their agency's letterhead regarding acceptance or denial within three (3) business days of referral. If decision requires an interview as part of the admission process, then acceptance or denial and interview must be conducted within seven (7) business days.

Standard 38: PSP Supervision and Oversight

- 38.2 Youth in PSPs must be supervised under the same standards as general RBWO programs. Youth may be assessed for "Graduated Independence" which outlines decreasing levels of supervision based upon the program objectives, the youth's maturity and other factors.

Additionally, for sexually harmful youth, graduated independence and decreasing levels of supervision must be approved by the DJJ CCM and performed in accordance with the youth's DJJ Safety Plan.

Standard 40: PSP Staff Training

- 40.1 At a minimum, the orientation session should also review the following policies and procedures: grievance policies and procedures, child abuse and exploitation policies and procedures, reporting requirements for suspected cases of child abuse and sexual exploitation, diseases and serious injuries, procedures for handling medical emergencies, and managing use of medications by residents in care, infection control policies and procedures, appropriate behavior management and emergency safety interventions, and privacy and confidentiality of residents.

Additionally, the orientation session should also review PREA requirements and include information on the DJJ Office of Ombudsman.

Standard 42: PSP Medical Services

- 42.1 In the event of a medical or mental health emergency, medical attention should be sought immediately. The provider should encourage the youth to comply with medical advice. Regardless of age, the county of custody should be notified immediately of any occurrence of treatment and/or refusal of treatment.

Additionally, all medical emergencies should be reported to DJJ via the Residential Emergency Phone List and Incident Reporting procedure.

- 42.2 At admission, the provider shall secure a signed consent for medical treatment authorization form. The form shall be signed by the youth's guardian. The consent form should be filed in the youth's case file at the program site.

Additionally, the DJJ CCM will ensure that the youth's parent(s)/legal guardian(s) sign and complete the Community Medical Permission Form granting the CCM permission to authorize mental health and medical-related services as necessary. In the event the provider/placement is unable to contact the youth's parent or legal guardian to obtain consent for medical mental health and medical related service of the youth, the CCM will be contacted as outlined in DJJ Policy 20.24 Community Residential Services.

Standard 43: PSP Life Coaching

- 43.3 Life coaches must have a written plan for each youth and have at least weekly face-to-face sessions. The Life Coach plan may be a separate document or incorporated into the PSP ISP/ Parenting Preparation & Life Skills Plan. Every youth's file should have case notes that accurately portray the services, treatment, parenting and life skills received in the home.

Additionally, Life Coaches must integrate the DJJ Transition Plan and DJJ Service Plan in the development of the PSP ISP and Parenting Preparation & Life Skills Plan.

CPA: Pregnant and/or Parenting Youth Placement

Standard 45: Child Placing Agency Foster Homes

- 45.5 Parenting or pregnant youth must be supervised under the same standards as general RBWO programs. Youth may be assessed for graduated independence which outlines decreasing levels of supervision based upon the program objectives, the youth's maturity and other factors.

Additionally, for sexually harmful youth, graduated independence and decreasing levels of supervision must be approved by the DJJ CCM and performed in accordance with the youth's DJJ Safety Plan.

Appendix

Appendix A: Definitions

Appendix B: Basic Expected Treatment Standards

Appendix C: Responsibilities of Youth

Appendix D: DJJ Scorecard and Appeal Process

Appendix E: Administrative Appeal Procedures

Appendix F: General Grievances/ Constituent Complaints Process

Appendix G: DJJ RBWO Staff Directory

Appendix H: DJJ RBWO Staff Directory Map

Appendix I: DJJ Referenced Policies

Appendix J: Forms

Definitions

Case Expeditor: Individual responsible for monitoring and tracking the RYDC population and youth receiving alternative to detention services for an assigned catchment area.

Community Case Manager (CCM): Juvenile Probation/Parole Specialist I, II, III (JPPS) or Juvenile Probation Officer I or II who provides direct supervision and coordination of services for a youth. The Community Case Manager also includes any member of an established case management team who may perform case management tasks.

Criminal History Unit (CHU): The DJJ unit responsible for reviewing and processing criminal record checks for applicants as previously defined.

Office of Ombudsman: DJJ's agency-wide problem solver responsible for investigating complaints and attempting to resolve them for the individuals involved.

Operations Support Manager (OSM): Provide resources and input on Transitional Planning for youth from their assigned Region.

Prison Rape Elimination Act (PREA): A federal law that supports the elimination, reduction, and prevention of sexual assault and rape within correctional systems. It applies to all federal, state, and local prisons, juvenile facilities, jails, police lock-ups, private facilities and community settings such as residential providers.

Regional Treatment Service Specialist (RTSS): Individual that provides clinical and contract compliance oversight to assigned RBWO Residential Placements in their assigned Region.

Residential Placement Specialist (RPS): Individual that provides placement and financial oversight to youth placed in a Residential Placement for youth from their assigned Region.

School Day: Any day in which school is conducted in accordance with the local school calendar.

Sexually Harmful Behavior Review Panel: A panel of multi-disciplinary members who meet monthly to bi-monthly to review specific cases of sexually harmful youth in order to make recommendations regarding treatment, reentry, and placement options.

Sexually Harmful Behaviors: Rape, sodomy, aggravated sodomy, child molestation, aggravated child molestation, enticing a child for indecent purposes, bestiality, necrophilia, sexual battery, aggravated sexual batter, public indecency, electronically furnishing sexually explicit material to a minor, distributing obscene materials, sexual exploitation of children, intent to rape or rob, and statutory rape.

Significant Event: Serious events relating to the care or protection of youth, including but not limited to:

- Media Coverage
- Injuries requiring more than First Aid
- Death

- Suicide/Homicidal Attempt
- Police Involvement
- Impact from Natural Disaster or Fire/Flood
- Emergency Safety Intervention: 3 or more times in one month with the same youth and/or more than 10 emergency safety interventions for all youth in care within a 30 day period
- Runaways
- New legal charges
- Prison Rape Elimination Act (PREA) incidents

Title IV-E: Provides federal government matching funds to reimburse for the costs of community residential programs for youth who meet federal eligibility criteria.

Transition Plan: A written plan developed to ensure a youth's smooth reintegration into the community, the development of which begins at admission. It addresses housing, family needs, continued treatment, education, and other areas that impact successful reintegration.

Utilization Review (UR): The review of the necessity, quality, effectiveness, and efficiency of services and procedures. It will include appropriateness of admission, services ordered and provided, length of stay, and discharge practices.



BASIC EXPECTED TREATMENT STANDARDS

- ▶ To be free of unlawful discrimination because of race, religion, color, sex, age, national origin, or disability, pregnancy, childbirth, or related medical conditions
- ▶ To be free of harassment because of race, religion, color, sex, gender, sexual orientation, age, national origin, or disability, pregnancy, childbirth, or related medical conditions
- ▶ To be free of bullying
- ▶ To send and receive mail
- ▶ To make and receive telephone calls
- ▶ To receive visitors
- ▶ To have contact with attorneys and other authorized legal representatives
- ▶ To have freedom in personal grooming and dress, except when it would conflict with facility requirements for safety, security, identification, or hygiene
- ▶ To file a grievance
- ▶ To be treated respectfully, impartially and fairly and to be addressed by name in a dignified, conversational form
- ▶ To be informed of the rules, procedures and schedules of the facility within 24 hours of admission
- ▶ To be free from corporal punishment, physical abuse, assault, personal injury, or disease
- ▶ To be free from interference with the normal bodily functions of eating, sleeping or bathroom functions by any person
- ▶ To be free from mental or verbal abuse, intimidation, threats, humiliation, or property damage
- ▶ To be free from sexual abuse
- ▶ To practice his/her faith and to participate in religious services and religious counseling on a voluntary basis
- ▶ To vote (by absentee ballot) if 18 years of age or older. (To register, the youth must contact the Registrar of Voters in the county where he/she resided before confinement.)
- ▶ To review his/her case record while in a facility or community residential placement
- ▶ To freedom of expression, as long as it does not interfere with the rights of others or the safety and security of the facility/program
- ▶ To due process in disciplinary proceedings
- ▶ To equal access to programs and services in co-correctional facilities or equivalent services among different facilities
- ▶ To maintain his/her physical, mental and emotional health by exercising on a daily basis



RESPONSIBILITIES OF YOUTH

- ▶ To obey all federal and state laws at all times
- ▶ To respect peers and staff by obeying all legal and reasonable staff requests
- ▶ To refrain from bullying, harassment, and unlawful discrimination through the use of verbal abuse, ethnic slurs, slander, and/or obscene gestures
- ▶ To follow the rules, procedures, schedules, and directions of staff while in the facility/program. Youth shall treat staff members and other youth with respect and shall not engage in activity that is designed to be disruptive to the living environment.
- ▶ To clean and maintain their living quarters and other general areas of the facility. Youth are expected not to damage public or privately owned property located within the facility
- ▶ To ask for mental health, medical, and dental care when needed
- ▶ To maintain his/her clothes, body, and hair in a manner consistent with the facility requirements for safety, security, identification, and hygiene
- ▶ To refrain from infringing upon the rights of other youth and/or staff
- ▶ To obey all orders of the court, to remain in placement and to participate fully, to the best of their ability, to achieve the goals identified in the Service Plan
- ▶ To promote the physical safety, sexual integrity, and personal security of others through the use of self-discipline
- ▶ To refrain from personal and/or intimate relationships with staff or other youth
- ▶ To refrain from possession contraband and to discourage others from possessing contraband
- ▶ To personally refrain from and discourage others from possessing or transmitting any kind of weapon or object which could be used as a weapon
- ▶ To personally refrain from and discourage others from possessing, using, buying, selling, or otherwise providing or having alcohol, tobacco, narcotics, or other illegal drugs, or from abusing any other substance as an intoxicant or stimulant
- ▶ To practice and encourage honesty in all interactions

DJJ Scorecard and Appeal Process

The DJJ scoring system has been developed to assist the vendor and DJJ with addressing performance and accountability.

The DJJ Scorecard is determined based on the following criteria:

- DJJ on-site reviews of youth and personnel records
- Vendor administration practices
- Physical plant
- Programming and services as outlined in each youth's Service Plan to address:
 - recidivism
 - youth reentry
 - family engagement:
 - educational
 - medical
 - mental health
 - health
- Outcome data from Utilization Reviews for each DJJ youth placed in a residential setting.

Each vendor, at a minimum, will receive (1) Un-Announced and (1) Announced Audits (one of which is the Joint Comprehensive Audit) per calendar year. Vendors may have additional audits. These additional audits will be based on the vendor's performance. After each announced and un-announced audit, the vendor will receive a DJJ Audit Score Summary Report from the DJJ Regional Treatment Services Specialist (RTSS). This report will contain: A Comprehensive Audit Score (Joint Comprehensive Audit Only); a Deficiency Report, and a Corrective Action Plan Template, as applicable.

Please note, the vendor will have (3) separate Comprehensive Audit Scores (one from each agency) for the Joint Comprehensive Audit and these scores will be posted and labeled on each agency's public website.

If the vendor wished to appeal the DJJ Audit Summary Report, they must do so in writing within 5 business days from receipt of the **RBWO** Audit Outcome Letter and the DJJ Audit Summary Report.. The Appeal Letter must contain: Deficiencies they disagree with; why they disagree; and describe the actions\resolution being requested. The Appeals Letter must be sent to the Operations Manager 2 for Residential and After-Care Services.

The DJJ Scorecards are published on the public DJJ website. Providers will receive an overall score and corresponding grade for each completed DJJ Audit. The Full Audit Detail Report will be made available to each vendor upon request.

The following tables outline the scoring measures and categories:

DJJ AUDIT MEASURES	CCI & CPA
Youth Safety & Security	30%
Programming & Services	25%
Quality of Care	25%
Program Administration	20%
TOTAL	100%

DJJ has implemented the following incentive credits designed to encourage performance at more than the minimum level of expectation.

INCENTIVE CREDIT	CCI & CPA
Active Agency Accreditation that is recognized by DJJ	2pts. per Audit Scorecard
Acceptance and Placement of DJJ youth of 70% or more of their current population	2pts. per Audit Scorecard
Zero PREA related incidents over the last 90 days	2pts. per Audit Scorecard

Scores and sub scores are calculated by summation of provider's performance measure by the total measure. All the calculations are percentage based.

Vendors will receive an overall score based on a 100-point scale. Vendors will receive a numerical score and a corresponding letter grade on each audit.

Scores are used for assisting DJJ staff with making the appropriate placement, contract evaluation and enforcing performance accountability.

The chart below describes the range of numerical scores and the corresponding letter grade.

SCORE	GRADE
97-100	A+
90-96	A
86-89	B+
80-85	B
75-79	C+
70-74	C
60-69	D
0-59	F

DJJ's acceptable provider performance has been set at 75% or higher. Providers are expected to maintain at least a 75/C+ or higher on Joint Comprehensive Audits. Providers who earn a score of less than 75% on (3) consecutive Joint Comprehensive Audits and/or Safety Reviews will be subject to admissions suspensions and other remedies as appropriate in order to address the performance deficiencies identified. Technical assistance will be provided by DJJ staff to vendors to address poor performance as needed.

Technical assistance will be provided by DJJ to assist vendors in areas of need. Providers who earn less than 75% **on any three consecutive audits will be subject to admissions suspensions and other remedies as appropriate in order to address the performance deficiencies.**

Procedures for Child Welfare Provider Inspection and Score Appeals Coordinated by the Department of Human Services

Department of Juvenile Justice (DJJ) Appeals

After the period for a provider to internally appeal annual inspection results expires and DJJ finalizes a provider's annual inspection scores:

1. Within 10 calendar days after the conclusion of a provider's internal appeal of annual inspection results or the expiration of the period a provider has to seek such internal appeal, DJJ will obtain a score and notify both the Department of Human Services (OHS) Appeals Coordinator and the provider when the score will be posted.
2. DJJ will ensure that the score will be posted within 30 calendar days of the conclusion of a provider's internal appeal of annual inspection results or the expiration of the period a provider has to seek such internal appeal.
3. Upon receipt of DJJ's notice, the OHS Appeals Coordinator will send an email to the affected providers that:
 - a. indicates when scores will be posted, and
 - b. explains to the provider how to initiate the appeals process.
4. The OHS Appeals Coordinator will send a copy of such email to DJJ's Residential and Aftercare Services Manager.
5. Dispute Resolution Meeting:
 - a. If a provider disagrees with its score, the provider may request a dispute resolution meeting with DJJ.
 - b. To request a dispute resolution meeting, the provider must submit, within 10 calendar days of receipt of DHS's email notice of scores to be posted, a written request with the OHS Appeals Coordinator by mail or email with a copy to DJJ.
 - c. The provider's meeting request must include a short and plain statement that:
 - i. identifies what the provider disagrees with,
 - ii. explains why the provider disagrees, and
 - iii. describes the resolution the provider seeks.
 - d. Within 10 calendar days of receipt of a meeting request, the OHS Appeals Coordinator will:
 - i. acknowledge receipt of the provider's request,
 - ii. notify DJJ's Residential and Aftercare Services Manager that a dispute resolution meeting has been requested and that the score should be noted as "under appeal," and
 - iii. coordinate a dispute resolution meeting with DJJ's Residential and Aftercare Services Manager and any other DJJ representative DJJ Deems necessary to reach a decision confirming or revising the provider's score.
 - e. If DJJ determines that further review is necessary for DJJ to reach a decision confirming or revising the provider's score, the dispute resolution meeting may be continued.
 - f. Within 20 calendar days of the conclusion of a dispute resolution meeting, DJJ will make a decision to confirm or revise the providers' score and communicate such decision to the Appeals Coordinator.

- g. Within 30 calendar days of the conclusion of a dispute resolution meeting, the OHS Appeals Coordinator will send to the provider a notice of DJJ confirming or revising the provider's score.
 - h. Any notice of DJJ confirming or revising the score will:
 - i. be sent to the provider through the same method the provider sent its request for a dispute resolution meeting (i.e., mail or email).
 - ii. to the extent the provider is a child-caring institution, child-placing agency, children's transition care center, or maternity home: explain how to proceed with the appeals process.
 - iii. to the extent the provider is not a child-caring institution, child-placing agency, children's transition care center, or maternity home: indicate that the score is final.
6. Office of State Administrative Hearings:
- a. To the extent the provider is a child-caring institution, child-placing agency, children's transition care center, or maternity home, after a dispute resolution meeting and the subsequent notice of DJJ confirming or revising the provider's score, if the provider still disagrees with the score, the provider may request an administrative hearing before an Administrative Law Judge with the Office of State Administrative Hearings.
 - b. To request a hearing, the provider must submit, within 10 calendar days of the provider's receipt of the notice of DJJ confirming or revising the score, a written request to DJJ by mail or email with a copy to the OHS Appeals Coordinator.
 - c. Upon receipt of a provider's written request, DJJ will:
 - i. notify the OHS Appeals Coordinator that the matter will be referred to the Office of State Administrative Hearings, and
 - ii. refer the matter to the Office of State Administrative Hearings.

General Grievances/ Constituent Complaints Process

Any grievance related to administrative operations or the provider's relations with the Department of Juvenile Justice should be handled through the DJJ Office of Ombudsman.

Complaints may be submitted via written letter to the DJJ Central Office (3408 Covington Highway, Decatur, Georgia 30032) or via e-mail at djjombudsman@djj.state.ga.us or by calling toll-free 1-855-396-2978.

You may also visit our online referral form at <http://www.djj.state.ga.us/Employees/DJJDupalOmbudsmanForm.aspx>.

Every complaint is reviewed and assessed. A return phone call, a letter, or a visit is made to anyone who contacts the Ombudsman to inform them of actions taken to resolve an issue or address a concern.

When the Ombudsman's Office receives an inquiry or complaint, a Customer Service Agent (CSA) is assigned to contact you and begin to investigate your concerns.

The Ombudsman will sort out details of the complaint and have each person involved submit a summary of their response.

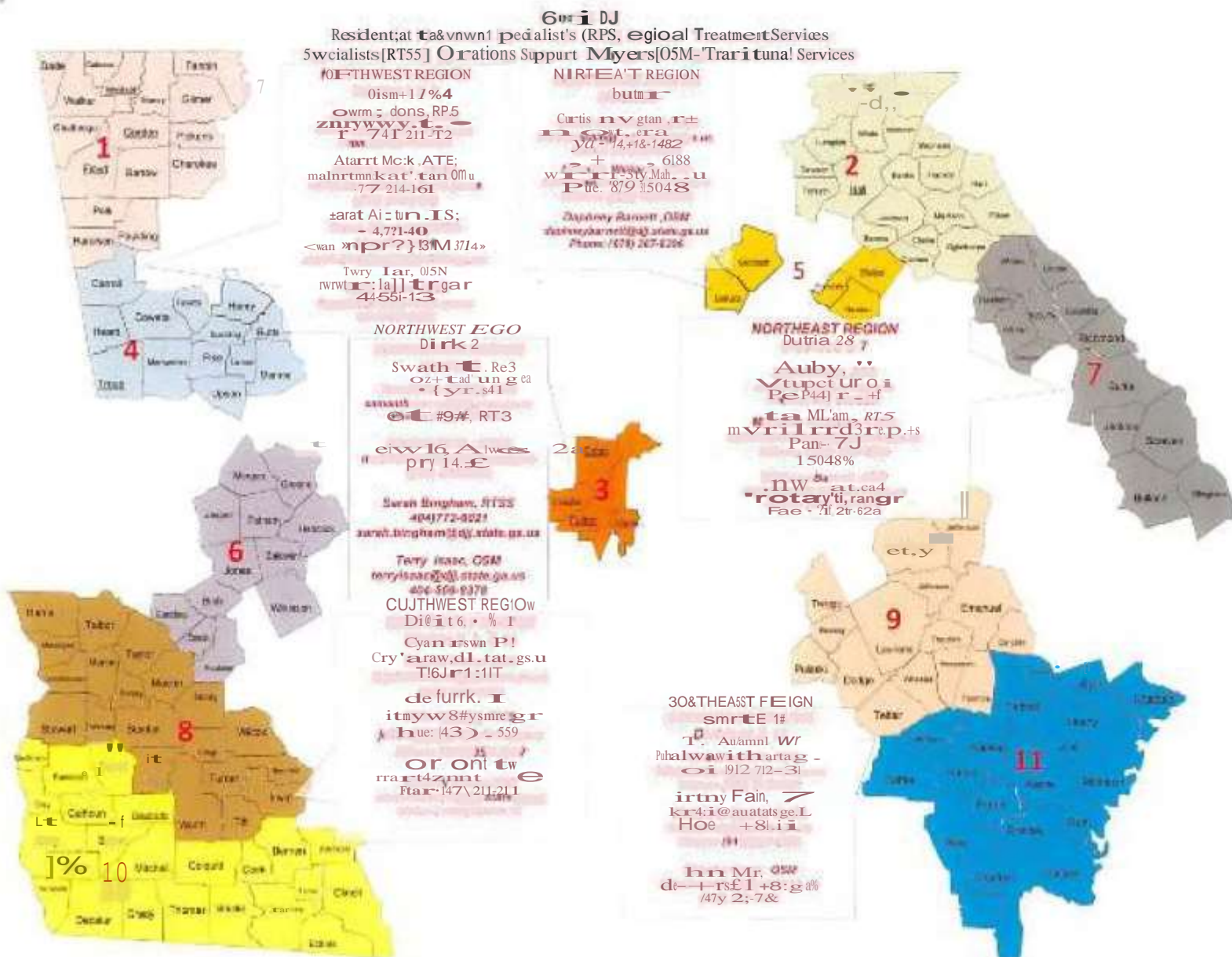
Once those summaries are received, the Ombudsman determines the next course of action needed.

After the final report is accepted and reviewed, the Ombudsman's Office contacts the individual who asked for the inquiry to discuss the resolution.

DJJ RBWO Staff Directory

Name	Title	Phone#	Email
Racquel Watson	Director of the Office of Residential and Community Based Services	(404) 859-4765	racquelwatson@djj.state.ga.us
Daphney Barnett	Operations Support Manager (OSM)	(678)367-8396	daphnevbarnett@djj.state.ga.us
Tulea Benjamin	Regional Placement Specialist (RPS)	(912) 312-0091	tuleabenjamin@djj.state.ga.us
Sarah Bingham	Regional Treatment Service Specialist (RTSS)	(404) 772-6021	sarah.bingham@djj.state.ga.us
Mantrell Blount	Operations Support Manager (OSM)	(470) 230-0119	mantrellblount@djj.state.ga.us
Crystal Brown	Regional Placement Specialist (RPS)	(706) 573-5387	crystalbrown@djj.state.ga.us
Angela Daly	Regional Placement Specialist (RPS)	(404) 673-9091	angeladaly@djj.state.ga.us
Terry Isaac	Operations Support Manager (OSM)	(404) 556-8378	terryisaac@djj.state.ga.us
Courtney Jones	Regional Placement Specialist (RPS)	(404) 210-7990	courtneyjones@djj.state.ga.us
Melinda Mack	Regional Treatment Service Specialist (RTSS)	(770) 314-8602	melindamack@djj.state.ga.us
Julia Mazyck	Regional Treatment Service Specialist (RTSS)	(478) 952-5597	juliamazyck@djj.state.ga.us
Samantha McVey	Regional Placement Specialist (RPS)	(678) 877-0415	samanthamcvey@djj.state.ga.us
Marcelle Moon	Regional Treatment Service Specialist (RTSS)	(678) 350-4809	marcellewilliams@djj.state.ga.us
Kimberly Pipkin	Regional Treatment Service Specialist (RTSS)	(912) 531-6956	kimpipkin@djj.state.ga.us
Curtis Washington	Regional Placement Specialist (RPS)	(404) 683-8827	curtiswashington@djj.state.ga.us
Tikesha Watts	Operations Support Manager (OSM)	(478) 232-7638	tikeshawatts@djj.state.ga.us

DJJ RBWO Staff Directory Map



DJJ Referenced Policies

3.52 Criminal Background Investigations

8.42 Crime Scene Preservation

13.22 Student Intake, Screening, and Advisement

15.9 Ombudsman Guidelines

15.10 Language Assistance Services

18.8 Transition of Class B Designated Felons from Secure Placements

20.22 Placement of Youth

20.24 Community Residential Programs

20.31 Needs Assessment and Service Planning

20.32 Standards of Contact

20.36 Supervision of Sexually Harmful Youth in the Community

23.1 Prison Rape Elimination Act

Forms

All RBWO related forms can be located in the DJJ RBWO zip folder provided to each contracted provider.